

<h1 style="margin: 0;">CLAIMS ONLY</h1>				Application Number <div style="font-size: 1.5em; font-weight: bold;">10/664917</div>		Filing Date	
				Applicant(s)			

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			1			
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Total Indep			1			
Total Depend			24			
Total Claims			25			

* May be used for additional claims or amendments

	Indep		Depend		Indep		Depend		Indep		Depend	
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